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OCT OT 700%	his form, together wit		or J	P.O. Box 1450 Alexandria, Vir	for Patents ginia 22313-1450	
NETRUCTIONS: 35 for applying the corrected to maintenance fee notification	rm should be used for trans respondence including the I below or directed otherwise	smitting the ISSUI Patent, advance ord in Block 1, by (a)	E FEE and lers and noti specifying	PUBLICATION FEE (if req fication of maintenance fees a new correspondence address	uired). Blocks 1 through 5 s will be mailed to the current ss; and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for	any change of address)			of mailing can only be used for this certificate cannot be used nal paper, such as an assignment of mailing or transmission.	
021324 75 HAHN LOESER	90 08/25/2005 P-DADVS IID				entificate of Mailing or Trans	emissian
One GOJO Plaza Suite 300 AKRON, OH 4431				I hereby certify that States Postal Service addressed to the M transmitted to the US	this Fee(s) Transmittal is being with sufficient postage for final Stop ISSUE FEE address PTO (571) 273-2885, on the control of the sufficient postage for final Stop ISSUE FEE address for the sufficient product of the sufficie	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.
/11/2005 EFLORES1 0000				Scott M.	07dham	(Depositor's name)
FC:2501	700.00 OP				10/4/05	(Signature)
APPLICATION NO.	FILING DATE	F	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/679,970 TITLE OF INVENTION: C	10/05/2000 ONTACT LENS AND MET	HODS OF MANU	William I FACTURE	E. Meyers	6734-8	1257
APPLN, TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$0	\$700	11/25/2005
EXAM	IINER	ART UNI	IT	CLASS-SUBCLASS		
SUGARMAN, SCOTT J		2873		351-16000R		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
"Fee Address" indicate PTO/SB/47; Rev 03-02	tion (or "Fee Address" Indica	tion form	2 registere	ed patent attorneys or agents.	If no name is 3	
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